

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: N089030	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/31/2016
NAME OF PROVIDER OR SUPPLIER ATRIA HEARTHSTONE WEST		STREET ADDRESS, CITY, STATE, ZIP CODE 3515 SW 6TH AVENUE TOPEKA, KS 66606		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	INITIAL COMMENTS The following citations are the result of a licensure re-survey with attached complaint conducted at the above named assisted living facility in Topeka, Kansas on 10/26/16, 10/27/16 and 10/31/16. Revised 2567 sent to facility on 11/7/16. Revised 2567 sent to facility on 12/19/16.	S 000		
S 115 SS=C	26-39-103 (d) Resident Right Inspection of Records (d) Inspection of records. (1) The administrator or operator shall ensure that each resident or resident's legal representative is afforded the right to inspect records pertaining to the resident. The administrator or operator, or the designee, shall provide a photocopy of the resident's record or requested sections of the resident's record to each resident or resident's legal representative within two working days of the request. If a fee is charged for the copy, the fee shall be reasonable and not exceed actual cost, including staff time. (2) The administrator or operator shall ensure access to each resident ' s records for inspection and photocopying by any representative of the department. This STANDARD is not met as evidenced by: KAR-39-103 (d) (2) The census equaled 29 residents the sample included 3 residents and one focus review resident. Based on interviews and record reviews for all residents, the operator failed to ensure access to each resident ' s records for inspection and photocopying by any representative of the department.	S 115		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S 115	Continued From page 1 Findings included: On 10/26/16 at 12:55pm during facility tour, access to resident records was requested. Requested user name and password to access electronic records, access was denied. Administrative staff #A stated access to resident electronic records cannot be allowed. On 10/26/16 at 12:55pm during facility tour, interview with licensed staff #B confirmed all resident nursing progress notes for all residents are located on the electronic system. He/she stated the facility will be happy to provide (print off) any records requested. For all residents, the operator failed to ensure access to each resident ' s records for inspection and photocopying by any representative of the department.	S 115		
S3085 SS=E	26-41-202 (a) Negotiated Service Agreement (a) The administrator or operator of each assisted living facility or residential health care facility shall ensure the development of a written negotiated service agreement for each resident, based on the resident ' s functional capacity screening, service needs, and preferences, in collaboration with the resident or the resident ' s legal representative, the case manager, and, if agreed to by the resident or the resident ' s legal representative, the resident ' s family. The	S3085		

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S3085	<p>Continued From page 2</p> <p>negotiated service agreement shall provide the following information:</p> <p>(1) A description of the services the resident will receive;</p> <p>(2) identification of the provider of each service; and</p> <p>(3) identification of each party responsible for payment if outside resources provide a service.</p> <p>This REQUIREMENT is not met as evidenced by: KAR 26-41-202 (a)</p> <p>The facility census equaled 29 the sample included 3 residents and one focus review resident. Based on record review and interview for 3 of 3 residents (#127, #128 and #129), the operator failed to ensure the Negotiated Service Agreement (NSA) completed for residents who required health care services, is done in collaboration with the resident or the resident's legal representative and contained the identification of each party responsible for payment if outside resources provide a service.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - Review of records for resident #126 with admission date of 8/26/16 with diagnoses of: Alzheimer's, dementia and hypothyroidism. <p>Functional Capacity Screen (FCS) dated 10/17/16 recorded resident required assistance with bathing, dressing, toileting, management of medications and treatments and resident has problems with short term memory, memory recall and decision making.</p>	S3085		

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S3085	<p>Continued From page 3</p> <p>Negotiated Service Agreement/ Health Care Service Plan (NSA/HCSP) dated 10/17/16 recorded resident to receive staff assistance with bathing, dressing, toileting, management of medications and cognition.</p> <p>NSA/HCSP dated 10/17/16 recorded signatures for a family member and facility licensed nurse #C as the individual who participated in the development of the NSA/HCSP. NSA/HCSP lacked signature of resident or legal representative as participating in the development of the NSA/HCSP.</p> <p>Facility records contain legal document for durable power of attorney (DPOA). Admission face sheet recorded resident has a DPOA and a Durable power of attorney for Health Care decisions (DPOAH).</p> <p>Interview on 10/27/16 at 3:00pm with licensed nurse #B stated he/she did not know if resident had a DPOAH but that DPOA granted permission for family member to make decisions for resident in his/her place.</p> <p>Email received on 10/28/16 at 3:58pm from licensed nurse #B stated resident does not have a DPOAH and confirmed resident is responsible for his/her own health care decisions.</p> <p>NSA lacked the signature of the resident and person responsible for financial decisions (DPOA).</p> <p>Review of records for resident #127 with admission date of 8/3/16 with diagnoses of: generalized weakness, hypertension, severe chronic obstructive pulmonary disease, cognitive impairment when off of oxygen, memory</p>	S3085		

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S3085	<p>Continued From page 4</p> <p>impairment.</p> <p>FCS dated 10/6/16 recorded resident required assistance with management of medications and treatments has problems with short term memory, memory recall and decision making.</p> <p>NSA/ HCSP dated 10/6/16 recorded resident to receive assistance with management of medications and treatments and cognitive: reminders to use oxygen and lists an outside provider for hospice services.</p> <p>NSA/HCSP lacked the name of the party responsible for payment of outside provider services.</p> <p>Review of records for resident # 128 with admission date of 1/10/14 and diagnoses of: Cerebrovascular accident (CVA), trigeminal neuralgia, depression and hypothyroidism.</p> <p>FCS dated 10/24/16 recorded resident required assistance with bathing and management of medications and treatments.</p> <p>NSA/HCSP dated 10/24/16 recorded resident to receive staff assistance with bathing and medication assistance provided by an outside provider. (Outside provider name) administers resident 's medications.</p> <p>NSA/HCSP lacked the name of the party responsible for payment of outside provider services.</p> <p>Interview on 10/27/16 with licensed nurses #B and #C confirmed residents #127 and #128 use outside providers and the NSA/HCSP lacked the names of the party responsible of payment of</p>	S3085		

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S3085	Continued From page 5 these services. For residents #127, #128 and #129, the operator failed to ensure the Negotiated Service Agreement (NSA) completed for residents who required health care services, is done in collaboration with the resident or the resident ' s legal representative and contained the identification of each party responsible for payment if outside resources provide a service.	S3085		
S3200 SS=E	26-41-205 (d) (1-2) Facility Administration of Medications (d) Facility administration of resident ' s medications. If a facility is responsible for the administration of a resident ' s medications, the administrator or operator shall ensure that all medications and biologicals are administered to that resident in accordance with a medical care provider ' s written order, professional standards of practice, and each manufacturer ' s recommendations. The administrator or operator shall ensure that all of the following are met: (1) Only licensed nurses and medication aides shall administer and manage medications for which the facility has responsibility. (2) Medication aides shall not administer medication through the parenteral route. This REQUIREMENT is not met as evidenced by: KAR 26-41-205(d)	S3200		

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S3200	<p>Continued From page 6</p> <p>The facility reported a census of 29 residents. The sample included 3 residents and 1 focus review resident. Based on record review and interview for resident #128, (and 4 non-sampled residents) who utilized outside provider assistance for medication administration, the operator failed to ensure all medications and treatments were administered in accordance with professional standards of practice and further failed to ensure only licensed nurses and medication aides administered medications for which the facility was responsible.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - Review of records for resident # 128 with admission date of 1/10/14 and diagnoses of: Cerebrovascular accident (CVA), trigeminal neuralgia, depression and hypothyroidism. <p>Functional Capacity Screen dated 10/24/16 recorded resident required assistance with bathing and management of medications and treatments.</p> <p>Negotiated Service Agreement/ health care service plan dated 10/24/16 recorded: Medication assistance provided by an outside provider. (Outside provider name) administers resident ' s medications.</p> <p>Resident record contained a physician ' s orders sheet dated 09/15/16 through 10/14/16 listing 12 medications to be administered daily, 2 to be administered twice a day, 1 to be administered 3 times a day and 3 to be administered as needed (PRN).</p>	S3200		

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S3200	<p>Continued From page 7</p> <p>Resident record dated 09/15/16 through 10/14/16 contained a medication record for medications. Record lacked documentation of administration of medications.</p> <p>Resident record contained " home health aide plan of care " with an X recorded in the Sunday - Saturday row labeled " medication reminder " (no initials, no dates of entries).</p> <p>Interview on 10/27/16 at 12:25pm in resident #128 's room, resident stated, " I ' m not sure who gives me my medicine, you ' ll have to ask them. " Resident indicated his/her medication was previously stored in a small black tool box in the cabinet. Tool box was empty. Resident stated, " They just bring it in now. " Cabinet contained a medication profile list for the resident, to which resident stated " That ' s all Greek to me " .</p> <p>Interview on 10/27/16 with licensed nurse #B stated an outside provider (home health agency name) administered the resident ' s medications, that the agency has an office located in the independent living wing and medications are stored there in a locked box, the agency presets the medications and the home health aide brings the box to the resident and resident takes the medications from the pre-set box.</p> <p>Observation on 10/27/16 at 2:25pm in the outside provider ' s office in the independent living wing revealed the agency keeps resident #128 medications in a black file box labeled with resident ' s name. Box contained resident prescription medication bottles and a quad (4 row) pill minder box with pills in it.</p> <p>Review of outside agency records lacked record</p>	S3200		

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S3200	Continued From page 8 of administration of medications by licensed nurse who presets the pill minder boxes. Interview on 10/27/16 at 2:25pm with licensed agency staff # Q stated he/she presets the medications for resident #128 in a pill minder box and the home health aide takes them down to the resident. He/she confirmed he/she does not record each medication he/she presets for residents. Interview on 10/27/16 at 2:25pm with agency staff #P stated he/she takes the pill minder box down to resident #128 ' s room, resident opens the box, he/she dumps the medications into resident ' s hand and resident takes them. Agency staff #P also confirmed he/she performs this service in the same manner for assisted living residents #326, #327, #328 and #329 (facility resident roster identified all 5 residents as not giving their own medication and having an outside provider). For residents # 128, #326, #327, #328 and #329, residents who required medication administration assistance, the operator failed to ensure all medications and treatments were administered in accordance with professional standards of practice and further failed to ensure only licensed nurses and medication aides administered medication when the facility allowed an outside provider ' s unlicensed staff to administer medications to residents and failed to ensure the resident ' s record contained documentation of medication administered.	S3200		
S3250 SS=D	26-41-105 (a) Resident Records a) The administrator or operator of each assisted living facility or residential health care facility shall	S3250		

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S3250	<p>Continued From page 9</p> <p>ensure the maintenance of a record for each resident in accordance with accepted professional standards and practices.</p> <p>(1) Designated staff shall maintain the record of each discharged resident who is 18 years of age or older for at least five years after the discharge of the resident.</p> <p>(2) Designated staff shall maintain the record of each discharged resident who is less than 18 years of age for at least five years after the resident reaches 18 years of age or at least five years after the date of discharge, whichever time period is longer.</p> <p>This REQUIREMENT is not met as evidenced by: KAR 26-41-105(a)</p> <p>The facility reported a census of 29 residents. The sample included 3 residents and 1 focus review resident. Based on record review and interview for sampled residents (#127), the operator failed to ensure the maintenance of a record for each resident in accordance with accepted professional standards and practices.</p> <p>Findings included: - Review of records for resident #127 with admission date of 8/3/16 with diagnoses of: generalized weakness, hypertension, severe chronic obstructive pulmonary disease, cognitive impairment when off of oxygen, memory impairment.</p> <p>Functional Capacity Screen dated 10/6/16 recorded resident required assistance with management of medications and treatments has</p>	S3250		

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S3250	<p>Continued From page 10</p> <p>problems with short term memory, memory recall and decision making.</p> <p>Negotiated Service Agreement/ Health Care Service Plan dated 10/6/16 recorded resident to receive assistance with management of medications and treatments and cognitive: reminders to use oxygen.</p> <p>Resident notes dated 8/3/16 at 6:00pm (admission date) recorded: assessment completed at this time, resident signed assessment and paperworkDr. (name) faxed at this time</p> <p>Resident record lacked admission physical assessment by a licensed nurse including vital signs, respiratory status and skin assessment. Resident notes lacked time of admission.</p> <p>Interview on 10/27/16 at 3:15pm with licensed nurse #B confirmed resident record lacked admission physical assessment including vital signs, respiratory status and skin assessment, confirmed resident has a history of open wounds on his/her buttocks.</p> <p>Review of facility policy for " Subject: assessment & reassessment recorded: "Once it is determined an individual desires to move into the community, the resident services director, executive director of designee will complete an Atria assessment prior to placement in the community. . . .The completed Atria assessment will determine the resident's level of care and generate a service plan. . . . The resident services director is responsible to observe each resident on a regular basis for changes in condition. . . .Examples of changes in condition that require reassessment are physical changes,</p>	S3250		

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S3250	Continued From page 11 mental/social changes, or illness, injury, trauma, and change in health care needs." For resident #127, the operator failed to ensure the maintenance of a record for each resident in accordance with accepted professional standards and practices.	S3250		